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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number

		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			('>				R/	TE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			(3 minus 20=		* Ø		X	9=		OR	X\$18=		
INDEPENDENT CLAIMS			4 minus 3 =		* /		X	12=		OR	X84=	84	
ΜU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+1	40=		OR	+280=		
* If	the difference	in column 1 is	ess than zero, enter "0" in c			olumn 2	TO	TAL		OR	TOTAL	824	
	C		MENDED - PART II				SM	SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
_		(Column 1)		(Colui		(Column 3)				•	OIII/ALL I		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=			
AME	Independent	*	Minus	***		=	X4	2=		OR	X84=		
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	CLAIM		+14	40=		OR	+280=		
TOTAL											TOTAL		
										OR	ADDIT. FEE		
		(Column 1)		(Colu	4	(Column 3)				_			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
AME	Independent	*	Minus	***	T CL AINA	-	X4	2=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								40=		OR	+280=		
								OTAL		OR	TOTAL ADDIT. FEE		
ADDIT. FEE													
		CLAIMS			HEST	1	_		100	1		T	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		=-	X4	2=		OR	X84=	1	
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDEN		T CLAIM				 	l on			
	If the entry in and	ıma 1 ia lasa ibas i	ho onto in ant	ıma O ······	o "O" io ca	olumn 2		40=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Nur	nber Previously Pa	id For" (Total o	r Independ	dent) is the	e highest number	found in	the ap	propriate bo	x in co	olumn 1.		